

Remarks

A. Pending Claims

Claims 66, 76, and 134 have been amended. Claims 66, 67, 69, 70, 73-78, 80-82, 134, and 159-167 are pending.

B. Claim Rejections Under 35 U.S.C. § 101

The Examiner rejected claims 66 and 134 under 35 U.S.C. §101 as being directed to non-statutory subject matter. More specifically, the Examiner states:

Based on Supreme Court precedent and recent Federal Circuit decisions, § 101 process must (1) be tied to another statutory class (such as a particular apparatus) or (2) transform underlying subject matter (such as an article or materials) to a different state or thing. If neither of these requirements is met by the claim(s), the method is not a patent eligible process under 35 U.S.C. § 101.

Claim 66 discloses a mere nominal recitation of technology and fails to transform the underlying subject matter to a different state, therefore the claimed method is non-statutory and rejected under 35 U.S.C. 101 (*Diamond v. Diehr*, 450 U.S. 175, 184 (1981); *Parker v. Flook*, 437 U.S. 584, 588 n.9 (1978); *Gottschalk v. Benson*, 409 U.S. 63, 70 (1972); *Cochrane v. Deener*, 94 U.S. 780, 787-88 (1876)).

Claim 134 contains similar limitations and is rejected for at least the same reasons.

(Office Action, page 2)

Amended claim 66 recites, *inter alia*:

A method of assessing fraud potential using a computer system, comprising:
retrieving request data from a memory of the computer system;
providing at least two fraud potential indicators ... wherein at least one of the assessment using the first fraud potential detection technique and the assessment using second fraud potential detection technique is based at least in part on the request data retrieved from the memory of the computer system;
displaying a score or a rank for at least the first and second fraud potential indicators simultaneously in a graphical user interface of the computer system;

Amended claim 134 recites, *inter alia*:

A method of assessing fraud potential using a computer system, comprising:

retrieving request data from a memory of the computer system;

assessing at least two fraud potential indicators for an insurance claim ... wherein at least one of the assessment using the first fraud potential detection technique and the assessment using second fraud potential detection technique is based at least in part on the request data retrieved from the memory of the computer system;

simultaneously displaying, in a graphical user interface of the computer system, information about the insurance claim including identifying information for the claim and a score or a rank for at least the first and second fraud potential indicators for the insurance claim;

Applicant submits that amended claims 66 and 134 are at least tied to another statutory class (e.g., a particular apparatus). For example, amended claims 66 and 134 recites retrieving request data from a computer system memory, assessing fraud potential indicators based on the retrieved request data, and displaying information in a graphical interface of the computer system. For at least these reasons, Applicant submits that claims 66 and 134 and the claims depending therefrom are patentable subject matter under 35 U.S.C. § 101.

C. The Claims Are Not Obvious Over Torres And Further In View of Pendleton and Suresh Pursuant To 35 U.S.C. § 103(a)

Claims 66, 67, 69-83, 101, 134 and 159-167 were rejected under 35 U.S.C. 103(a) as obvious over U.S. Patent No. Application No. 2005/0043961 to Torres et al. (herein after "Torres"), further in view of U.S. Patent No. 6,253,186 to Pendleton Jr. (herein after "Pendleton") and further in view of U.S. Patent No. 7,263,492 to Suresh et al. ("Suresh"). Applicant respectfully disagrees with these rejections.

To reject a claim as obvious, the Examiner has the burden of establishing a *prima facie* case of obviousness. *In re Warner et al.*, 379 F.2d 1011, 154 U.S.P.Q. 173, 177-178 (C.C.P.A. 1967). To establish a *prima facie* obviousness of a claimed invention, all the claim limitations must be taught or suggested by the prior art. *In re Royka*, 490 F.2d 981, 180 U.S.P.Q. 580 (C.C.P.A. 1974).

Independent Claim 66

Claim 66 describes a combination of features including:

automatically determining, on the computer system, a weighted, combined fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill, wherein the weighted, combined fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill combines at least the first fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill assessed using the first fraud technique and the second fraud potential indicator assessed for the request corresponding to the particular accident, financial transaction, or medical bill using the second fraud technique, wherein, in combining the first fraud potential indicator and the second fraud potential indicator, the first fraud potential indicator is weighted differently from the second fraud potential indicator; and

referring the request corresponding to the particular accident, financial transaction, or medical bill for review if the weighted, combined fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill exceeds a threshold value, wherein the threshold value is adjusted to control the number of requests with the weighted, combined fraud potential indicator exceeding the threshold value

The cited art does not appear to teach or suggest at least these features of claim 66, in combination with the other features of the claim.

The Office Action relies in part on Torres with respect to some of the above-quoted features of claim 66. The Examiner states:

Torres et al. (961) discloses a method, comprising:

...
determining a weighted, combined fraud potential indicator for the request (Paragraphs 22 and 43)
(Office Action, pages 3-4)

Applicant disagrees that Torres discloses determining a weighted, combined fraud potential indicator for the request. Paragraphs [0022] and [0043] of Torres disclose “a system for identification, detection and investigation of maleficent acts, comprising a means for receiving one or more transaction datasets, a means for verifying each transaction dataset identity and classifying each transaction dataset into a first category, a second category and a third category, a

means for detecting and arbitrating ambiguities in each transaction dataset in the second category for reclassifying into the first category and the third category, a means for investigating each transaction dataset in the third category for affirming the third category classification of a first group of investigated datasets and reclassifying the third category classification of a remaining second group of investigated datasets into the first category classification, a means for enabling transaction datasets in the first category, and a means for disabling transaction datasets in the third category”. Torres discloses that analytic functions may include a similarity search function, a biometric function, a rules engine, a neural net, a model engine, an auto link analysis, a decision tree, and a report engine. Torres does not appear to disclose anything about weighting of indicators, much less determining a weighted, combined fraud potential indicator for a request.

For at least this reason, Torres does not appear to teach or suggest determining a weighted, combined fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill, wherein the weighted-combined fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill, as recited by claim 66.

The Office Action states:

Pendleton Jr. ('186) discloses determining a weighted combined fraud potential indicator that combines at least the first fraud potential indicator assessed using the first fraud technique and the second fraud potential indicator assessed using the second fraud technique, wherein, in combining the first fraud potential indicator and the second fraud indicator, the first fraud potential indicator is weighted differently from the second fraud potential indicator, and referring the request for review if the combined or weighted combined fraud potential indicator exceeds a threshold value, wherein the threshold value is adjusted to control the number of requests with the weighted combined fraud potential indicator exceeding the threshold value (col. 7, lines 31-59)

Pendleton states:

In other words, the fraud indicators stored in memory 62 for each claim line analyzed for a particular provider are summed and divided by the total number of claim lines. This approach represents one of several which may be used. Other approaches include computing a weighted average of the individual fraud indicators, or selecting a subset of the indicators for use in computing the composite fraud indicator. After the composite fraud

indicator is computed, it is compared to a threshold number which is based upon prior experience (block 70). The threshold number may be arbitrarily fixed or, alternatively, may be dynamic in the sense of being periodically or continuously updated by the system as additional data is processed. If the composite fraud indicator exceeds the threshold, the results for the subject supplier or provider are written to neural network (NN) data base file 72 in a process represented by block 74. Only information on providers exceeding the threshold is stored in NN data base file 72. Data base file 72 serves as an input to a data base tracking system which provides for continuity across several days (or other period of interest). In the event the fraud indicator exceeds the threshold value, provider results are also written to statistics file 76 in a process represented by block 78. If the composite fraud indicator does not exceed the threshold, the system asks if a report is to be provided on all providers (block 80). If so, the provider results are written to statistics file 76. Statistics file 76 is essentially a report file which can be viewed by the user on line or printed, at the user's discretion. The system then branches as indicated to C and proceeds with neural network analysis of the first claim line for the new provider. This process continues until the end of sorted encoded claim file 48 is detected by block 68.

(Pendleton, col., 7, lines 28-59) (emphasis added)

Claim 66 includes the features of “wherein a first fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill is assessed using a first fraud potential detection technique and a second fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill is assessed using a second fraud potential detection technique, wherein the first fraud potential detection technique is different from the second fraud potential detection technique”. The at least two fraud potential indicators, and the first and second fraud potential detection technique are all applied to “the particular accident, financial transaction, or medical bill”. Pendleton discloses that multiple “claim lines” for a particular supplier can be added to produce a composite of all claim lines for the supplier and generating composite number of the multiple claim lines for the particular supplier. Pendleton does not teach or suggest at least the feature of automatically determining a weighted, combined fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill, in combination with the other features of claim 66.

The Examiner acknowledges that Torres does not explicitly disclose a request to a financial institution relating to a particular accident, a particular financial transaction, or a particular medical bill. The Examiner appears to rely on Suresh to remedy the deficiencies of Pendleton. The Examiner states:

Suresh et al. ('492) discloses a request to a financial institution relating to particular accident, a particular financial transaction, or a particular medical bill.

Suresh discloses using a collection of medical claims data associated with an entity (such as a patient or a provider) to generate a profile of the entity based on the probabilities of states experienced/associated with the entity. (Suresh, column 7, line 48 to column 8, line 3). A predictive model is applied to the entity profiles to “predict (classify) entities as potentially fraudulent or abusive.” (Suresh, column 8, lines 7-11). Suresh, alone or in combination with Pendleton or the other cited art, does not appear to teach or suggest “a weighted, combined fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill” in combination with the other features of claim 66. Moreover, Pendleton and Suresh, taken alone or in combination with one another or the other cited art, do not appear to teach or suggest referring a request corresponding to the particular accident, financial transaction, or medical bill for review if the weighted, combined fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill exceeds a threshold value, in combination with the other features of claim 66. Moreover, Pendleton and Suresh, taken alone or in combination one another or the other cited art, do not appear to disclose a threshold value is adjusted to control the number of requests with the weighted, combined fraud potential indicator exceeding the threshold value in combination with the other features of claim 66.

The Office Action acknowledges that Torres does not disclose “two potential fraud indicators.” Nonetheless, the Office Action takes the position that it would have been obvious to one having ordinary skill in the art at the time the invention was made to use two fraud potential indicators, “since it has been held that *mere duplication* of the essential working parts of a device involves only routine skill in the art.” (emphasis added). The Office Action relies on *St. Regis Paper Co. v. Bemis Co.*, 193 USPQ 8, 11 (7th Cir. 1977). In *St. Regis Paper*, the court held that

redundancy of layers to confer strength was obvious in the paper bag art. *St. Regis Paper*, 193 USPQ at 11. Claim 66 of the present application, however, does not involve “mere redundancy.”

Claim 66 describes a combination of features including: “wherein the first fraud potential detection technique is different from the second fraud potential detection technique.” The combination of cited art does not appear to teach or suggest at least the above quoted feature, in combination with the other features of claim 66.

The present application is similar to *Ex Parte Mattison*, 1995 WL 1696767 (Bd. Patent App. & Intf. 1995). In *Mattison*, the Board reversed an obviousness rejection that relied on *St. Regis Paper*. The court stated: “In the present case, the comparators are not redundant since each has *distinct inputs*.” *Mattison* at *6 (emphasis added). Similarly, the potential fraud indicators recited in claim 66 are not redundant because they are assessed using different fraud detection techniques. Rather than relying on a single fraud potential indicator to determine the probability that a request may be fraudulent, Applicant’s claims are directed to basing the determination of potential fraud on multiple (i.e., at least two) fraud potential indicators that are derived using different techniques. Moreover, claim 66 includes the feature of a “weighted, combined fraud potential indicator” and “referring the request ... if the weighted, combined fraud potential indicator for the request ... exceeds a threshold value.” At least the above-quoted features of claim 66 in combination with the other features of the claim do not appear to be taught or suggested by the cited art.

The cited art, considered separately or in combination, does not appear to teach or suggest all of the features of the claim 66. Applicant respectfully requests removal of the obviousness rejections of claim 66 and the claims dependent thereon.

Independent Claim 76

Amended claim 76 recites, *inter alia*:

automatically determine a weighted, combined fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill, wherein the weighted-combined fraud potential indicator for the request corresponding to the particular accident, financial

transaction, or medical bill combines at least the first fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill assessed using the first fraud technique and the second fraud potential indicator assessed for the request corresponding to the particular accident, financial transaction, or medical bill using the second fraud technique, wherein, in combining the first fraud potential indicator and the second fraud potential indicator, the first fraud potential indicator is weighted differently from the second fraud potential indicator; and

refer the request corresponding to the particular accident, financial transaction, or medical bill for review if the weighted, combined fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill exceeds a threshold value, wherein the threshold value is adjusted to control the number of requests with the weighted-combined fraud potential indicator exceeding the threshold value

For reasons similar to those set forth above with respect to claim 66, Applicant submits that the cited art does not teach or suggest at least this feature of claim 76, in combination with the other features of the claim.

Independent Claim 80

Amended claim 80 recites, *inter alia*:

automatically determining a weighted, combined fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill, wherein the weighted-combined fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill combines at least the first fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill assessed using the first fraud technique and the second fraud potential indicator assessed for the request corresponding to the particular accident, financial transaction, or medical bill using the second fraud technique, wherein, in combining the first fraud potential indicator and the second fraud potential indicator, the first fraud potential indicator is weighted differently from the second fraud potential indicator; and

referring the request corresponding to the particular accident, financial transaction, or medical bill for review if the weighted, combined fraud potential indicator for the request corresponding to the particular accident, financial transaction, or medical bill exceeds a threshold value, wherein

the threshold value is adjusted to control the number of requests with the weighted-combined fraud potential indicator exceeding the threshold value

For reasons similar to those set forth above with respect to claim 66, Applicant submits that the cited art does not teach or suggest at least this feature of claim 80, in combination with the other features of the claim.

Independent Claim 134

Claim 134 recites, *inter alia*:

automatically determining, on the computer system, a weighted, combined fraud potential indicator for the insurance claim that combines at least the first fraud potential indicator for the insurance claim assessed using the first type of fraud detection and the second fraud potential indicator for the insurance claim assessed using the second type of fraud detection, wherein, in combining the first fraud potential indicator and the second fraud potential indicator, the first fraud potential indicator is weighted differently from the second fraud potential indicator; and

referring the insurance claim for review if the weighted, combined fraud potential indicator for the insurance claim exceeds a threshold value, wherein the threshold value is adjusted to control the number of insurance claims with the weighted, combined fraud potential indicator exceeding the threshold value.

For reasons similar to those set forth above with respect to claim 66, Applicant submits that the cited art does not teach or suggest at least this feature of claim 134, in combination with the other features of the claim.

Dependent Claim 69

Claim 69 recites, *inter alia*:

wherein the request is an insurance claim, the method further comprising displaying a plurality of insurance claims, wherein the insurance claims are organized into lists according to referred claims, assigned claims, and rejected claims, and wherein selecting a graphical component respective to referred claims brings up a list of referred claims, wherein selecting a graphical component respective to assigned claims brings up a list of assigned claims, and wherein selecting a graphical component respective

to rejected claims brings up a list of rejected claims

Applicant submits that the cited art does not teach or suggest this feature of claim 69, in combination with the other features of the claim. With respect to the above quoted feature, the Examiner relies on Figure 9 of Torres. (See Office Action, page 6). Figure 9 of Torres depicts a screen shot of a link analysis tool. The portion of the description corresponding to Figure 9 states:

FIG. 9 shows a screen shot 900 of a link analysis tool used in the investigative step of the present invention. Based on a similar or partial match between an individual associated with a transaction dataset and a database of known threats found in earlier identification and detection stages, an investigator may perform additional background searches by simply clicking the relevant databases to further refine a potential threat. If further investigation is warranted, the link analysis tool 900 may access the results from the classification or detection process. The link analysis tool 900 may illustrate an identification section 910 for identifying an individual and an additional list of possible associations related to the individual. A second graphic section 920 provides a graphical depiction of the individual with links to other related information. This link-chart methodology is one of several investigatory methods for uncovering suspicious associations that an investigator might use.

(Torres, Paragraph 0049)

Torres discloses a link analysis tool that may be used to illustrate an identification section for identifying an individual and a list of possible associations related to the individual. Torres does not teach or suggest at least the above-quoted feature of claim 69 in combination with the other features of the claim. Applicant requests removal of the rejection of claim 69.

Dependent Claim 163

Claim 163 recites, *inter alia*:

wherein the first type of fraud potential detection comprises a predictive model and the second type of fraud potential detection comprises a business rules engine.

The Examiner states, “[c]laim 163 is parallel with claim 161 and is rejected for at least

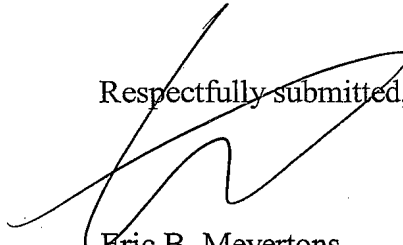
the same reasons.” Applicant respectfully disagrees. Claim 163 recites different features than claim 161 and therefore is not “in parallel” with claim 161. Claim 163 recites “the first type of fraud potential detection comprises a predictive model” and “the second type of fraud potential detection comprises a business rules engine.” The differences between the above-quoted features are additional clear evidence that the “mere duplication” rationale of *St. Regis* does not apply. Applicant requests removal of the rejection of claim 163.

D. Additional Remarks

Applicant submits that all claims are in condition for allowance. Favorable consideration is respectfully requested.

Applicant requests a one-month extension of time. If any additional extension of time is required, Applicant hereby requests the appropriate extension of time. An authorization for one-month extension of time from a deposit account will be made upon electronic submission of this document. If any fees are required or have been overpaid, please appropriately charge or credit those fees to Meyertons, Hood, Kivlin, Kowert & Goetzel, P.C. Deposit Account No. 50-1505/5053-64100/EBM.

Respectfully submitted,



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Date: June 5, 2009